

B1 (Official Form 1)(1/08)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Longest, Arthur L. Jr.		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-0009		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 504 South Outer Drive Wilmington, IL <div style="text-align: right; font-size: small;">ZIP Code 60481</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Will		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <div style="margin-top: 10px;"> <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding </div> <hr/> Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <div style="display: flex; justify-content: space-between; font-size: small;"> <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000 </div>		
Estimated Assets <div style="display: flex; justify-content: space-between; font-size: small;"> <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion </div>		
Estimated Liabilities <div style="display: flex; justify-content: space-between; font-size: small;"> <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion </div>		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):
Longest, Arthur L. Jr.

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Doree Wojtkowiak **May 27, 2009**
Signature of Attorney for Debtor(s) (Date)
Doree Wojtkowiak 06202144

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.
☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Longest, Arthur L. Jr.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Arthur L. Longest, Jr.

Signature of Debtor **Arthur L. Longest, Jr.**

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

May 27, 2009

Date

Signature of Attorney*

X /s/ Doree Wojtkowiak

Signature of Attorney for Debtor(s)

Doree Wojtkowiak 06202144

Printed Name of Attorney for Debtor(s)

Law Office of Gloria M. Longest

Firm Name

**385 South Broadway
Coal City, IL 60416**

Address

Email: glongest@cbcast.com

815-634-0000 Fax: 815-623-2641

Telephone Number

May 27, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re Arthur L. Longest, Jr.

Debtor(s)

Case No. _____

Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Arthur L. Longest, Jr.
Arthur L. Longest, Jr.

Date: May 27, 2009

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.,
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	15,200.00		
B - Personal Property	Yes	3	5,128.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	5		13,791.48	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	21		46,071.81	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,847.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,237.40
Total Number of Sheets of ALL Schedules		36			
Total Assets			20,328.00		
Total Liabilities				59,863.29	

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.,
Debtor

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	13,791.48
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	13,791.48

State the following:

Average Income (from Schedule I, Line 16)	2,847.00
Average Expenses (from Schedule J, Line 18)	2,237.40
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,123.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	13,791.48	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		46,071.81
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		46,071.81

B6A (Official Form 6A) (12/07)

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
504 S. Outer Dr., Wilmington, IL 60481	1/6	-	15,200.00	0.00

Sub-Total > **15,200.00** (Total of this page)

Total > **15,200.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		Cash for emergencies	-	5.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Furniture	-	500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Miscellaneous compact discs	-	50.00
6. Wearing apparel.		Clothing	-	100.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.		Fishing poles & tackle	-	50.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > **705.00**
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		2007 Federal Income Tax Refund	-	748.00
		2008 Federal Income Tax Refund	-	1,215.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

Sub-Total > **1,963.00**
(Total of this page)

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1998 Nissnan Altima	-	2,010.00
26. Boats, motors, and accessories.		Minkota trolling motor	-	50.00
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Miscellaneous hand tools, lawn mower	-	400.00

Sub-Total >	2,460.00
(Total of this page)	
Total >	5,128.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (12/07)

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Real Property</u>			
504 S. Outer Dr., Wilmington, IL 60481	735 ILCS 5/12-901	15,000.00	95,000.00
<u>Cash on Hand</u>			
Cash for emergencies	735 ILCS 5/12-1001(b)	5.00	5.00
<u>Household Goods and Furnishings</u>			
Furniture	735 ILCS 5/12-1001(b)	500.00	500.00
<u>Books, Pictures and Other Art Objects; Collectibles</u>			
Miscellaneous compact discs	735 ILCS 5/12-1001(a)	50.00	50.00
<u>Wearing Apparel</u>			
Clothing	735 ILCS 5/12-1001(a)	100.00	100.00
<u>Firearms and Sports, Photographic and Other Hobby Equipment</u>			
Fishing poles & tackle	735 ILCS 5/12-1001(b)	50.00	50.00
<u>Other Liquidated Debts Owning Debtor Including Tax Refund</u>			
2007 Federal Income Tax Refund	735 ILCS 5/12-1001(b)	748.00	748.00
2008 Federal Income Tax Refund	735 ILCS 5/12-1001(b)	1,215.00	1,215.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
1998 Nissan Altima	735 ILCS 5/12-1001(b)	1,082.00	2,010.00
<u>Boats, Motors and Accessories</u>			
Minkota trolling motor	625 ILCS 45/3A-7(d)	50.00	50.00
<u>Other Personal Property of Any Kind Not Already Listed</u>			
Miscellaneous hand tools, lawn mower	735 ILCS 5/12-1001(b)	400.00	400.00

Total: **19,200.00** **100,128.00**

0 continuation sheets attached to Schedule of Property Claimed as Exempt

B6D (Official Form 6D) (12/07)

In re Arthur L. Longest, Jr. Case No. _____
Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)								
Total (Report on Summary of Schedules)							0.00	0.00

0 continuation sheets attached

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/97 1040A Taxes				716.59	0.00 716.59
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/99 1040A Taxes				585.73	0.00 585.73
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/2000 1040A Taxes				2,059.62	0.00 2,059.62
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/2001 1040 Taxes				753.16	0.00 753.16
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/2002 1040EZ Taxes				1,413.41	0.00 1,413.41
Subtotal (Total of this page)							5,528.51	0.00 5,528.51

Sheet **1** of **4** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/2003 1040EZ Taxes				582.96	0.00 582.96
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/2004 1040 Taxes				1,396.86	0.00 1,396.86
Account No. xxx-xx-0009 Department of the Treasury/IRS Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114		-	12/31/98 1040A Taxes				1,049.91	0.00 1,049.91
Account No. xxx-xx-0009 Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	12/97 1040 Taxes				728.04	0.00 728.04
Account No. xxx-xx-0009 Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	12/99 1040 Taxes				1,606.12	0.00 1,606.12
Subtotal (Total of this page)							5,363.89	0.00 5,363.89

Sheet **2** of **4** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. xxx-xx-0009			12/2004					
Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	1040 Taxes					0.00
							718.21	718.21
Account No. xxx-xx-0009			12/2003					
Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	1040 Taxes					0.00
							399.84	399.84
Account No. xxx-xx-0009			12/2002					
Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	1040 Taxes					0.00
							361.06	361.06
Account No. xxx-xx-0009			12/2001					
Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	1040 Taxes					0.00
							121.42	121.42
Account No. xxx-xx-0009			12/1998					
Illinois Department of Revenue Bankruptcy Section/Level 7-425 100 W. Randolph St. Chicago, IL 60601		-	1040 Taxes					0.00
							917.19	917.19
Subtotal								0.00
(Total of this page)							2,517.72	2,517.72

Sheet **3** of **4** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. xxxxxx3921			Taxes					
Indiana Dept. of Revenue 100 N. Senate Ave. Indianapolis, IN 46204		-						0.00
								87.00
Account No. xxxxxx0951			Taxes					
Indiana Dept. of Revenue 100 N. Senate Ave. Indianapolis, IN 46204		-						0.00
								131.87
Account No. xxxxxxxx8304			Taxes					
Indiana Dept. of Revenue 100 N. Senate Ave. Indianapolis, IN 46204		-						0.00
								162.49
Account No.								
Account No.								
Subtotal (Total of this page)							381.36	0.00 381.36
Total (Report on Summary of Schedules)							13,791.48	0.00 13,791.48

Sheet **4** of **4** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T O R	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. ARTH0971 A. Abdel-Meguid, MD 500 N. Wall St., Ste. 501 Kankakee, IL 60901-2962		-	11/27/01 Medical services				206.29
Account No. xxxxxx2500TCF ACC International 919 Estes Court Schaumburg, IL 60193-4427		-	NSF TCF Natinal Bank				573.95
Account No. xx-xxx3670 Associated Radiologist Joliet P.O.Box 3837 Springfield, IL 62708-3837		-	2/10/05 Medical Services				42.00
Account No. xxxx-xxxxxx6693 CB Accounts Inc. PO Box 1289 Peoria, IL 61654-1289		-	Medical services				411.00
Subtotal (Total of this page)							1,233.24

20 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Cxxxxx7577 Central Illinois Radiological 5200 Reliable Parkway Chicago, IL 60686-0052	-	10/18/07 Medical services				8.28
Account No. Qxx6673 Certified Services Inc PO Box 177 Waukegan, IL 60079	-	Med1 GI Koehn Md Assoc Sc: Medical services				97.00
Account No. xxxxxxxx9625 Chicago Institute of Neurosurgery PO Box 2401 Bedford Park, IL 60499-2401	-	4/6/06 Medical services				22.35
Account No. xxxxTRxx4615 Clerk of the Court/Grundy County PO Box 707 Morris, IL 60450	-	6/10/04 Fine				140.00
Account No. x9609 Collection Prof/lasalle 723 1st St La Salle, IL 61301	-	Opened 11/01/04 Last Active 11/11/04 Collection Attorney: Rezin Orthopedics Centers:Medical services Rezin Acct. #40498				201.00
Sheet no. <u>1</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 468.63

B6F (Official Form 6F) (12/07) - Cont.

In re Arthur L. Longest, Jr. Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxx1042 ComEd/Customer Care Ctr. Bldg Attn: Revenue Management Dept. 2100 Swift Dr. Oak Brook, IL 60523	-		Various dates Utility service				868.32
Account No. xxxxxx0011 ComEd/Customer Care Ctr. Bldg Attn: Revenue Management Dept. 2100 Swift Dr. Oak Brook, IL 60523	-		Utility service				339.98
Account No. xxxxxx6459 Credit Management 4200 International Pwy Carrolton, TX 75007	-		Opened 7/01/08 Collection Attorney Comcast Chicago Seconds - 2000 Comcast Acct #8798200120129916				495.00
Account No. xx0018 Creditors Collection Bureau 755 Almar Pkwy Bourbonnais, IL 60914	-		Med1 02 Riverside Medical Center Medical services				223.00
Account No. xx0019 Creditors Collection Bureau 755 Almar Pkwy Bourbonnais, IL 60914	-		Med1 02 Riverside Medical Center Medical services				92.00
Sheet no. <u>2</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page) 2,018.30

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Bxxxxxxx1757 Creditors Discount & Audit P.O. Box 213 Streator, IL 61364-0213	-	Opened 5/01/04; 12/14-12/17/03 Morris Hospital Acct. #DD0010173069				447.00
Account No. BxxxxxAX5943 Creditors Discount & Audit Attn: Bankruptcy Po Box 213 Sreator, IL 61364	-	Opened 11/01/03; 6/23/03 Collection Attorney: Morris Hospital; Medical services Original Acct. DD0010115856				417.00
Account No. xxxxxxxx3128 Custom Coll Srvs Inc 55 E 86th Ave Ste D PO Box 10428 Merrillville, IN 46410	-	Opened 1/01/03 Collection Attorney: Meth Emergency Physicians: Medical services Original Acct. #OP85844				395.00
Account No. xxxxxxx2364 Digestive Health Associates PC 1100 Houbolt Road Joliet, IL 60431	-	4/10/08 Medical services				50.88
Account No. x1376 Epic Group SC Slot 303125 P.O. Box 66973 Chicago, IL 60666-0973	-	12/14/03 Medical services				766.00
Sheet no. 3 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,075.88

B6F (Official Form 6F) (12/07) - Cont.

In re Arthur L. Longest, Jr. Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. x1376epi Epic Group SC Slot 303125 P.O. Box 66973 Chicago, IL 60666-0973			2/0/05 Medical services				12.90
Account No. xx1530A Financial Control Solutions PO Box 668 Germantown, WI 53022			Opened 7/01/03 Collection Attorney: Midwest Pulmonary Consultants: Medical services				95.00
Account No. xx1530 Financial Control Solutions PO Box 668 Germantown, WI 53022			Opened 4/01/03 Collection Attorney: Midwest Pulmonary Consultants; medical services				86.00
Account No. xxxxx/xx0642 Future Diagnostics Group 254 Republic Avenue Joliet, IL 60435			Medical services				354.30
Account No. 1561 Gary A.Carollo DDS 101 Fulton St.I Wilmington, IL 60481			10/8/96 Dental services				60.00
Sheet no. <u>4</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page) 608.20

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx5480CBB Grundy County Radiologists Inc. PO Box 5997 Dept. 7014 Carol Stream, IL 60197-5997	-	8/14/08 Medical services				19.84
Account No. Grundy County Radiologists Inc. PO Box 5997 Dept. 7014 Carol Stream, IL 60197-5997	-	12/10/07 Medical services				11.48
Account No. xxx3449 Harvard Collection 4839 N Elston Ave Chicago, IL 60630	-	Opened 11/01/02 Collection Attorney: Joliet Medical Group Medical services				128.00
Account No. DDBJ1494 Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	10/5/05 Medical services				199.18
Account No. DDBG6085 Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	7/18/05 Medical services				3,080.15
Sheet no. 5 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 3,438.65

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. DDAY6603		10/18/04				
Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	Medical services				
						347.79
Account No. DDBR0605		6/20/06				
Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	Medical services				
						93.48
Account No. DDBN5149		2/25/06				
Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	Medical services				
						15.46
Account No. DDBM8584		2/7/06				
Healthcare Ctrs of Morris Hospital dba Morris Hospital 201 S. Wabena Ave., Ste. B Minooka, IL 60447-8735	-	Medical services				
						123.83
Account No. xxxxxxxHCCOxx9904		7/6/07				
Heart Care Centers of Illinois PO Box 766 Bedford Park, IL 60499-0766	-	Medical services				
						106.76
Sheet no. <u>6</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						687.32

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxHCCOxxx7438		6/8/08				
Heart Care Centers of Illinois PO Box 766 Bedford Park, IL 60499-0766	-	Medical services				88.40
Account No. x4 LM 177		Judgment 1/12/05				
Holsinger & Associates, Ltd. 101 West Illinois Avenue, Ste. One Morris, IL 60450	-	Judgment, costs, attorney's fees				7,008.92
Account No. xxx-xx-0009		Overpayment of benefits				
IL Dept. of Employment Security Benefit Payment Control Div. PO Box 4385 Chicago, IL 60680	-					304.00
Account No. LONAR000		2/22/06-8/3/07				
Inst for Personal Development 1401 Lakewood Dr. Ste. A Morris, IL 60450	-	Medical services				270.58
Account No. LONDA000		7/21/06; 10/31/07				
Jennifer L. Jones, MD LLC 1499 Lakewood Dr. Unit C Morris, IL 60450	-	Medical services				138.00
Sheet no. <u>7</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,809.90

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. LONAR000 John S. Zielinski MD 4254 55th Street Chicago, IL 60632-4642	-	10/6/05-12/8/05 Medical services				547.00
Account No. xx1210 Joliet Pain Center 13888 Collection Center Dr. Chicago, IL 60693-0138	-	12/13/06 Medical services				98.22
Account No. xxx8833 Joliet Pain Center 13888 Collection Center Dr. Chicago, IL 60693-0138	-	12/7/06 Medical services				15.58
Account No. xx-xxxx9657 Kankakee Radiology Associates 6135 Reliable Parkway Chicago, IL 60686	-	Medical services				35.00
Account No. xxx2896 KCA Financial Services 628 North St Geneva, IL 60134	-	Opened 9/01/05 Collection Attorney: Silver Cross Hospital Medical services Silver Cross Acct. #F017455809				76.00
Sheet no. 8 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 771.80

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	H W J C DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xx0611 Mainline Video 684 So. Broadway Coal City, IL 60416		Miscellaneous -					39.20
Account No. BCx8669 Methodist E.R. Physicians 55 Eawst 86th Ave., Ste. A PO Box 10645 Merrillville, IN 46411		9/11/02 Medical services -					28.00
Account No. JPx5734 Methodist E.R. Physicians 55 Eawst 86th Ave., Ste. A PO Box 10645 Merrillville, IN 46411		9/11/02 Medical services -					22.00
Account No. xxxxxxx8993 Methodist Hospital-Northlake PO Box 66525 Indianapolis, IN 46266		9/11/02 Medical servies -					1,250.00
Account No. x6940 Michigan Avenue Internists LLC 200 S. Michigan Ave.,Ste. 805 Chicago, IL 60604		11/18/04 Medical services -					500.00
Sheet no. <u>9</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page) 1,839.20

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx2661 Midstate Collection So PO Box 3292 Champaign, IL 61826	-	Opened 12/01/06 Collection Attorney: Orthopedic Associates Of Kankakee; Medical services				325.00
Account No. xx1530 Midwest Pulmonary Consultants 10660 W. 143rd St., Ste. B Orland Park, IL 60462	-	12/6/01-12/20/01 Medical services				24.97
Account No. BGx7193 MIMIT PC Department 4419 Carol Stream, IL 60122-0001	-	4/19/06-6/21/06 Medical services				33.00
Account No. DDxxxxxx9612 Morris Hospital 150 West High Street Morris, IL 60450	-	1/13-3/11/04 Medical services				235.00
Account No. DDxxxxxxx0120 Morris Hospital 150 West High Street Morris, IL 60450	-	2/25/06 Medical services				15.46
Sheet no. 10 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 633.43

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. DDxxxxxx2795 Morris Hospital 150 West High Street Morris, IL 60450	-	10/18/04 Medical services				347.79
Account No. DDxxxxxx9295 Morris Hospital 150 West High Street Morris, IL 60450	-	10/5/05 Medical services				5.65
Account No. DDxxxxxx5375 Morris Hospital 150 West High Street Morris, IL 60450	-	2/10-2/11/05 Medical services				671.45
Account No. DDxxxxxx7631 Morris Hospital 150 West High Street Morris, IL 60450	-	12/4/01 Medical services				78.10
Account No. DDxxxxxx8672 Morris Hospital 150 West High Street Morris, IL 60450	-	7/18/05 Medical services				6,467.00
Sheet no. <u>11</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,569.99

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. DDxxxxxx5856		6/23/03				
Morris Hospital 150 West High Street Morris, IL 60450	-	Medical services				417.09
Account No. DDCR7859		8/14/08				
Morris Hospital 150 West High Street Morris, IL 60450	-	Medical services				144.80
Account No.		1/3/08				
Morris Hospital 150 West High Street Morris, IL 60450	-	Medical services				89.98
Account No. DDCJ0024		12/10/07				
Morris Hospital 150 West High Street Morris, IL 60450	-	Medical servicesd				62.52
Account No. DDCC6022		6/8/07				
Morris Hospital 150 West High Street Morris, IL 60450	-	Medical servicesd				523.28
Sheet no. 12 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,237.67

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. DDAT2393 Morris Hospital 150 West High Street Morris, IL 60450	-	3/4/04 Medical services				32.12
Account No. DDAR5432 Morris Hospital 150 West High Street Morris, IL 60450	-	1/13-29/04 Medical services				140.83
Account No. xx-xx5480 Morris Radiology Associates c/o Joseph Porada 216 Middaugh Road Clarendon Hills, IL 60514	-	7/18/08 Medical services				54.60
Account No. xx5480 Morris Radiology Associates c/o Joseph Porada 216 Middaugh Road Clarendon Hills, IL 60514	-	6/23/03 Medical services				79.60
Account No. xx5480 Morris Radiology Associates c/o Joseph Porada 216 Middaugh Road Clarendon Hills, IL 60514	-	2/10/05 Medical services				11.25
Sheet no. 13 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 318.40

B6F (Official Form 6F) (12/07) - Cont.

In re Arthur L. Longest, Jr. Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx5480 Morris Radiology Associates c/o Joseph Porada 216 Middaugh Road Clarendon Hills, IL 60514	-	10/18/04 Medical services				31.80
Account No. x4417 National Cardio Labs LLC 17300 17th St., #J344 Tustin, CA 92780-1955	-	11/27-28/01 Medical services				276.20
Account No. xxxx5829 NCO - Medclr 507 Prudential Rd Horsham, PA 19044	-	Opened 12/01/06 Med1 02 Fischer Mangold Joliet: Medical services				302.00
Account No. xx6160 Neuro & Ortho Institute of Chicago 4501 N. Winchester Chicago, IL 60640	-	4/17/06 Medical services				292.97
Account No. xx1169 Neurological and Spine Surgery 4562 Paysphere Circle Chicago, IL 60674-4562	-	12/6/05 Medical services				256.00
Sheet no. <u>14</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,158.97

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx-xx-xx-x808 0		Utility service				
Northern Illinois Gas Bankruptcy & Collections PO Box 549 Aurora, IL 60507	-					1,058.48
Account No. x-xx-xx-x254-2		Utility service				
Northern Illinois Gas Bankruptcy & Collections PO Box 549 Aurora, IL 60507	-					966.17
Account No. ZCx3160		9/12/02 Medical services				
NW Ind. Radiology Services PC 55 East 86th Avenue, Ste. A PO Box 10645 Merrillville, IN 46411	-					38.56
Account No. 9308		7/5/06-9/6/06 Medical services				
Oak Orthopedics 6370 Reliable Pkwy Chicago, IL 60686	-					324.75
Account No. x9147		7/26/06 Medical services				
Orthorx, Inc. PO Box 848034 Dallas, TX 75284-8034	-					54.93
Sheet no. 15 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,442.89

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx7072		-	6/20/06 Med1 02 Morris Hospital; Medical service Original Acct. #DD0010504514				93.00
Pellettieri & Assoc 991 Oak Creek Dr Lombard, IL 60148							
Account No. xxx6961		-	7/18/05 Med1 02 Morris Hospital; Medical services; Original Acct. #DD0010368672				598.00
Pellettieri & Assoc. 991 Oak Creek Dr Lombard, IL 60148							
Account No. xxx6462		-	2/7/06 Med1 02 Morris Hospital: Medical services Original Acct. #DD0010451665				124.00
Pellettieri & Assoc. 991 Oak Creek Dr Lombard, IL 60148							
Account No. LONAR000		-	10/19/07 Medical services				306.25
Philip Hays MD SC 400 S. Kennedy Dr., Ste. 300 Bradley, IL 60915-2682							
Account No. DCxxxxxx4731		-	5/8/02 Medical services				129.55
Provena/St. Joseph Medical Center 333 N. Madison St. Joliet, IL 60435							
Sheet no. <u>16</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							1,250.80
Subtotal (Total of this page)							

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. xx9181		-	Medical services			5.00
Radiologists of Grundy County PO Box 379 Orland Park, IL 60462						
Account No. DDBB9371		-	2/10-11/05 Medical services			171.45
Radiologists of Grundy County PO Box 379 Orland Park, IL 60462						
Account No. xxx480C2CG		-	6/20/06 Medical services			3.30
Radiologists of Grundy County PO Box 379 Orland Park, IL 60462						
Account No. xx5480		-	12/14/03 Medical services			3,323.00
Radiologists of Grundy County PO Box 379 Orland Park, IL 60462						
Account No. xxxxx8159		-	10/17/07 Medical services			551.00
Riverside Medical Center Express Bill P.O. Box 88036 Chicago, IL 60680-1036						
Sheet no. <u>17</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						4,053.75

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxx5802		Medical services				49.21
Riverside Medical Center Express Bill P.O. Box 88036 Chicago, IL 60680-1036	-					
Account No. xxxxx7333		Medical services				17.68
Riverside Medical Center Express Bill P.O. Box 88036 Chicago, IL 60680-1036	-					
Account No. xxxxx5729		12/27/01 Medical services				7.12
Riverside Medical Center 135 LaSalle Street, Dept. 1995 Chicago, IL 60674-1995	-					
Account No. xxxxx2111		10/19/07 Medical services				280.12
Riverside Medical Center 135 LaSalle Street, Dept. 1995 Chicago, IL 60674-1995	-					
Account No. xxxxx8630		10/19/07 Medical services				3,511.00
Riverside Medical Center 135 LaSalle Street, Dept. 1995 Chicago, IL 60674-1995	-					
Sheet no. 18 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						3,865.13

B6F (Official Form 6F) (12/07) - Cont.

In re Arthur L. Longest, Jr. Case No. _____
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx8528 SBC/c/o AT&T Bankruptcy Dept. PO Box 769 Arlington, TX 76004	-	Various dates Utility service				27.96
Account No. xxxxxx/9674 Sherwin Ritz MD 33 E. Willow St., Ste. B Coal City, IL 60416-1869	-	7/15/08 Medical services				186.96
Account No. LONAR000 Spyro Analytis MD 114 W. Waverly Street Morris, IL 60450	-	Various dates Medical services				500.83
Account No. xx3007 Suburban Chicago Newspapers PO Box 1005 Tinley Park, IL 60477-9105	-	3/9/07 Subscription				10.00
Account No. xx0223 Suburban Chicago Newspapers PO Box 1005 Tinley Park, IL 60477-9105	-	11/10/07 Subscription				10.00
Sheet no. <u>19</u> of <u>20</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 735.75

B6F (Official Form 6F) (12/07) - Cont.

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. LONAR000		12/14-12/17/03				680.00
Tratt Clinic Box 769 219 Bedford Rd. Morris, IL 60450	-	Medical services				
Account No. xx1051		12/14/05				25.35
University of Illinois at Chicago Physician Group 135 S. LaSalle St., Box 3293 Chicago, IL 60674-3293	-	Medical services				
Account No. xxxxx1709		10/18/07				23.00
University Pathologists PC 5620 Southwck Blvd Toledo, OH 43613	-	Medical services				
Account No. 1101		Various dates				1,125.56
Village of Diamond 1750 E. Division St. Diamond, IL 60416	-	Water & Sewer				
Account No.						
Sheet no. 20 of 20 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,853.91
(Report on Summary of Schedules)						Total 46,071.81

In re **Arthur L. Longest, Jr.**

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

In re Arthur L. Longest, Jr.,
Debtor

Case No. _____

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

In re **Arthur L. Longest, Jr.**

Debtor(s)

Case No.

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Divorced	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): - Son Ethan	AGE(S): - 26 6
Employment:	DEBTOR	SPOUSE
Occupation		
Name of Employer	Disabled	
How long employed		
Address of Employer		

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)
2. Estimate monthly overtime

DEBTOR	SPOUSE
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>

3. SUBTOTAL

\$ <u>0.00</u>	\$ <u>N/A</u>
----------------	---------------

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
b. Insurance
c. Union dues
d. Other (Specify): _____

\$ <u>103.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <u>103.00</u>	\$ <u>N/A</u>
------------------	---------------

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <u>-103.00</u>	\$ <u>N/A</u>
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7. Regular income from operation of business or profession or farm (Attach detailed statement)
8. Income from real property
9. Interest and dividends
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above
11. Social security or government assistance (Specify): **Social Security**

\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>1,827.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>1,123.00</u>	\$ <u>N/A</u>

12. Pension or retirement income
13. Other monthly income (Specify): _____

\$ <u>0.00</u>	\$ <u>N/A</u>
\$ <u>0.00</u>	\$ <u>N/A</u>

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <u>2,950.00</u>	\$ <u>N/A</u>
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15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$ <u>2,847.00</u>	\$ <u>N/A</u>
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16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

\$ <u>2,847.00</u>	
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(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

In re Arthur L. Longest, Jr.

Debtor(s)

Case No. _____

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? Yes <u> </u> No <u>X</u>		
b. Is property insurance included? Yes <u> </u> No <u>X</u>		
2. Utilities:	\$	325.00
a. Electricity and heating fuel	\$	85.00
b. Water and sewer	\$	120.00
c. Telephone	\$	0.00
d. Other _____	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	0.00
5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	50.00
7. Medical and dental expenses	\$	173.40
8. Transportation (not including car payments)	\$	300.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	30.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	179.00
d. Auto	\$	50.00
e. Other _____	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other _____	\$	0.00
c. Other _____	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Rent for Son & Grandson	\$	875.00
Other _____	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,237.40
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	2,847.00
b. Average monthly expenses from Line 18 above	\$	2,237.40
c. Monthly net income (a. minus b.)	\$	609.60

B6 Declaration (Official Form 6 - Declaration), (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.

Debtor(s)

Case No. _____

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 38 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date May 27, 2009

Signature /s/ Arthur L. Longest, Jr.

Arthur L. Longest, Jr.

Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.

Debtor(s)

Case No.

Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

2. Income other than from employment or operation of business

None

☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None
☐

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
ComEd Bill Payment Center Chicago, IL 60668-0001	3/9/09	\$340.00	\$0.00

None
☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None
☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
------------------------------------------------------------	-----------------	-------------	-----------------------

4. Suits and administrative proceedings, executions, garnishments and attachments

None
☐

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
James Soboleski v. Arthur L. Longest; 04 LM 177	Complaint	Thirteenth Judicial Circuit, Grundy County, Illinois	Judgment entered 1/12/05

None
☒

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---------------------------------------------------------------------	-----------------	--------------------------------------

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------------	------------------------------------------------------------	-----------------------------------

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--------------------------------------------	--------------------------------	--------------	-------------------------------

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
-----------------------------------	----------------------------------------------------------------------------------------------------------	--------------

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
GreenPath, Inc. 38585 Country Club Dr., Ste. 210 Farmington, MI 48331	5/18/09	100.00

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Credit InfoNet P.O. Box 73093 Cleveland, OH 44193	3/4/09	30.00
Doree Wojtkowiak 107 North Larkin, Ste. 107 Joliet, IL 60435	5/13/09	750.00

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
None <input type="checkbox"/> b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.		

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	----------------------------------------------------------------------------------------	---------------------------------------

12. Safe deposit boxes

None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
-------------------------------------------------	---------------------------------------------------------------------	----------------------------	------------------------------------------

13. Setoffs

None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
6080 Northern Drive, Morris, IL - 2 yrs		
2375 East Clark St., Diamond, IL		

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

18 . Nature, location and name of business

None

- ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
NAME				

None

- ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
------	---------

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

None

- ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

None

- ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
------	---------	-------------------------

None

- ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
------	---------

None

- ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
------------------	-------------

20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
-------------------	----------------------	---------------------------------------------------------------------

- None ☐ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
-------------------	---------------------------------------------------------

21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
------------------	--------------------	------------------------

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
------------------	-------	---------------------------------------------

22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
-----------------------------------------------------------	-----------------------------------	------------------------------------------------------------

24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------------	--------------------------------------

25. Pension Funds.

- None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
----------------------	--------------------------------------

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date May 27, 2009

Signature /s/ Arthur L. Longest, Jr.
Arthur L. Longest, Jr.
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.

Debtor(s)

Case No. _____

Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: -NONE-	Describe Property Securing Debt:
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date May 27, 2009

Signature /s/ Arthur L. Longest, Jr.
Arthur L. Longest, Jr.
Debtor

United States Bankruptcy Court
Northern District of Illinois

In re Arthur L. Longest, Jr.

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$	<u>750.00</u>
Prior to the filing of this statement I have received.....	\$	<u>750.00</u>
Balance Due.....	\$	<u>0.00</u>

2. \$ 299.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. [Other provisions as needed]
- Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: May 27, 2009/s/ Doree Wojtkowiak

Doree Wojtkowiak 06202144
Law Office of Gloria M. Longest
385 South Broadway
Coal City, IL 60416
815-634-0000 Fax: 815-623-2641
glongest@cbcast.com

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Doree Wojtkowiak 06202144

Printed Name of Attorney

Address:

385 South Broadway

Coal City, IL 60416

815-634-0000

glongest@cbcast.com

X **/s/ Doree Wojtkowiak**

Signature of Attorney

May 27, 2009

Date

Certificate of Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Arthur L. Longest, Jr.

Printed Name(s) of Debtor(s)

X **/s/ Arthur L. Longest, Jr.**

Signature of Debtor

May 27, 2009

Date

Case No. (if known) _____

X _____

Signature of Joint Debtor (if any)

Date

**United States Bankruptcy Court
Northern District of Illinois**

In re **Arthur L. Longest, Jr.**

Debtor(s)

Case No. _____

Chapter **7**

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **107**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **May 27, 2009**

/s/ Arthur L. Longest, Jr.

Arthur L. Longest, Jr.

Signature of Debtor

A. Abdel-Meguid, MD
500 N. Wall St., Ste. 501
Kankakee, IL 60901-2962

ACC International
919 Estes Court
Schaumburg, IL 60193-4427

Amerian Revenue Corporation Inc
8450 Broadway
Merrillville, IN 46410-6221

Andersonh Randolph Price LLC
10039 Bissonnet Ste. 385
Houston, TX 77036

Assetcare, Inc.
PO Box 15380
Wilmington, DE 19850-5380

Associated Radiologist Joliet
P.O.Box 3837
Springfield, IL 62708-3837

CB Accounts Inc.
PO Box 1289
Peoria, IL 61654-1289

CBCS
P.O. Box 2334
Columbus, OH 43216-2334

Central Illinois Radiological
5200 Reliable Parkway
Chicago, IL 60686-0052

Certified Services Inc
PO Box 177
Waukegan, IL 60079

Chicago Institute of Neurosurgery
PO Box 2401
Bedford Park, IL 60499-2401

Clerk of the Court/Grundy County
PO Box 707
Morris, IL 60450

Collection Prof/lasalle
723 1st St
La Salle, IL 61301

Comcast Cable
PO Box 3002
Southeastern, PA 19398-3002

ComEd/Customer Care Ctr. Bldg
Attn: Revenue Management Dept.
2100 Swift Dr.
Oak Brook, IL 60523

Credit Management
4200 International Pwy
Carrolton, TX 75007

Credit Protection Association LP
PO Box 3002
Southeastern, PA 19398-3002

Creditors Collection Bureau
755 Almar Pkwy
Bourbonnais, IL 60914

Creditors Collection Bureau
P.O. Box 63
Kankakee, IL 60901-0063

Creditors Discount & Audit
P.O. Box 213
Streator, IL 61364-0213

Creditors Discount & Audit Co.
415 E. Main St., P.O. Box 213
Streator, IL 61364

Creditors Disount & Audit
Attn: Bankruptcy
Po Box 213
Sreator, IL 61364

Custom Coll Srvs Inc
55 E 86th Ave Ste D
PO Box 10428
Merrillville, IN 46410

Custom Collection Services, Inc.
55 E. 86th Ave., Ste. D
PO Box 10428
Merrillville, IN 46411

Custom Collection Services, Inc.
PO Box 10428
55 E. 86th Ave., Ste. D
Merrillville, IN 46411

Department of the Treasury/IRS
Centralized Insolvency Operations
PO Box 21126
Philadelphia, PA 19114

Digestive Health Associates PC
1100 Houbolt Road
Joliet, IL 60431

Epic Group SC
Slot 303125
P.O. Box 66973
Chicago, IL 60666-0973

Financial Control Solutions
PO Box 668
Germantown, WI 53022

Fischer Mangold/Joliet
P.O.Box 850001
Orlando, FL 32885-1006

Future Diagnostics Group
254 Republic Avenue
Joliet, IL 60435

Gary A.Carollo DDS
101 Fulton St.1
Wilmington, IL 60481

GL Koehn MD & Assoc. SC
241 S. Frontage Rd., Ste. 39
Burr Ridge, IL 60527-5850

Grundy County Radiologists Inc.
PO Box 5997 Dept. 7014
Carol Stream, IL 60197-5997

Harris & Harris, Ltd.
600 W. Jackson Blvd, Ste. 400
Chicago, IL 60661

Harvard Collection
4839 N Elston Ave
Chicago, IL 60630

Healthcare Ctrs of Morris Hospital
dba Morris Hospital
201 S. Wabena Ave., Ste. B
Minooka, IL 60447-8735

Heart Care Centers of Illinois
PO Box 766
Bedford Park, IL 60499-0766

Hodges & David
8700 Broadway
Merrillville, IN 46410

Holsinger & Associates, Ltd.
101 West Illinois Avenue, Ste. One
Morris, IL 60450

Honor Creditors Agency Inc
PO Box 703777
Dallas, TX 75370-3777

IL Dept. of Employment Security
Benefit Payment Control Div.
PO Box 4385
Chicago, IL 60680

Illinois Collection Service Inc.
P.O. Box 646
Oak Lawn, IL 60454-0646

Illinois Department of Revenue
Bankruptcy Section/Level 7-425
100 W. Randolph St.
Chicago, IL 60601

IMBS
PO Box 189053
Plantation, FL 33318-9975

Indiana Dept. of Revenue
100 N. Senate Ave.
Indianapolis, IN 46204

Inst for Personal Development
1401 Lakewood Dr. Ste. A
Morris, IL 60450

Jennifer L. Jones, MD LLC
1499 Lakewood Dr. Unit C
Morris, IL 60450

John S. Zielinski MD
4254 55th Street
Chicago, IL 60632-4642

Joliet Medical Group
333 Madison Street
Joliet, IL 60435

Joliet Pain Center
13888 Collection Center Dr.
Chicago, IL 60693-0138

Kankakee Radiology Assoc SC
1905 W. Court St.
Kankakee, IL 60901

Kankakee Radiology Associates
6135 Reliable Parkway
Chicago, IL 60686

KCA Financial Services
628 North St
Geneva, IL 60134

Keynote Consulting Inc
220 W. Campus Dr. #102
Arlington Heights, IL 60004-1498

Linebarger Goggan Blair & Sampson
PO Box 06140
Chicago, IL 60606-0140

Mainline Video
684 So. Broadway
Coal City, IL 60416

Medical Recovery Specialists Inc.
2350 E. Devon, Ste. 225
Des Plaines, IL 60018

Medical Recovery Specialists Inc.
2200 E. Devon Ave. Ste. 288
Des Plaines, IL 60018-4519

Methodist E.R. Physicians
55 Eawst 86th Ave., Ste. A
PO Box 10645
Merrillville, IN 46411

Methodist Hospital-Northlake
PO Box 66525
Indianapolis, IN 46266

Michigan Avenue Internists LLC
200 S. Michigan Ave., Ste. 805
Chicago, IL 60604

Midstate Collection So
PO Box 3292
Champaign, IL 61826

Midwest Pulmonary Consultants
10660 W. 143rd St., Ste. B
Orland Park, IL 60462

MIMIT PC
Department 4419
Carol Stream, IL 60122-0001

MIMIT PC
PO Box 2368
Mount Vernon, IL 62864-0046

Morris Hospital
150 West High Streeet
Morris, IL 60450

Morris Radiology Associates
c/o Joseph Porada
216 Middaugh Road
Clarendon Hills, IL 60514

MQC Collection Services
P.O. Box 140700
Toledo, OH 43614

National Cardio Labs LLC
17300 17th St., #J344
Tustin, CA 92780-1955

NCO - Medclr
507 Prudential Rd
Horsham, PA 19044

NCO Fiancial Systems Inc
PO Box 15110
Wilmington, DE 19850

NCO Financial Systems
P.O. Box 41447
Philadelphia, PA 19101-1457

NCO Financial Systems, Inc.
PO Box 17095
Wilmington, DE 19850-7095

Neuro & Ortho Institute
1630 Paysphere
Chicago, IL 60674

Neuro & Ortho Institute of Chicago
4501 N. Winchester
Chicago, IL 60640

Neurological and Spine Surgery
4562 Paysphere Circle
Chicago, IL 60674-4562

Nicor
P.O. Box 416
Aurora, IL 60568-0001

Nicor Gas
PO Box 310
Aurora, IL 60507-0310

Northern Illinois Gas
Bankruptcy & Collections
PO Box 549
Aurora, IL 60507

NW Ind. Radiology Services PC
55 East 86th Avenue, Ste. A
PO Box 10645
Merrillville, IN 46411

Oak Orthopedics
6370 Reliable Pkwy
Chicago, IL 60686

Oak Orthopedics
400 S. Kennedy Drive, Ste. 100
Bradley, IL 60915

Orthopedic Associates of Kankakee
400 South Kennedy
Bradley, IL 60915

Orthorx, Inc.
PO Box 848034
Dallas, TX 75284-8034

Pellettieri & Assoc
991 Oak Creek Dr
Lombard, IL 60148

Pellettieri & Assoc.
991 Oak Creek Dr
Lombard, IL 60148

Pellettieri & Associates
991 Oak Creek Drive
Lombard, IL 60148

Philip Hays MD SC
400 S. Kennedy Dr., Ste. 300
Bradley, IL 60915-2682

Provena/St. Joseph Medical Center
333 N. Madison St.
Joliet, IL 60435

Radiologists of Grundy County
PO Box 379
Orland Park, IL 60462

Rezin Orthopaedic
1051 W. Route 6, Ste. 100
Morris, IL 60450

Riverside Medical Center
Express Bill
P.O. Box 88036
Chicago, IL 60680-1036

Riverside Medical Center
135 LaSalle Street, Dept. 1995
Chicago, IL 60674-1995

Riverside Medical Center
350 North Wall Street
Kankakee, IL 60901

SBC/c/o AT&T
Bankruptcy Dept.
PO Box 769
Arlington, TX 76004

Sherwin Ritz MD
33 E. Willow St., Ste. B
Coal City, IL 60416-1869

Silver Cross Hospital
1200 Maple Road
P.O. Box 100
Joliet, IL 60432

Spyro Analytis MD
114 W. Waverly Street
Morris, IL 60450

Suburban Chicago Newspapers
PO Box 1005
Tinley Park, IL 60477-9105

Tratt Clinic
Box 769
219 Bedford Rd.
Morris, IL 60450

University of Illinois at Chicago
Physician Group
135 S. LaSalle St., Box 3293
Chicago, IL 60674-3293

University Pathologists PC
5620 Southwck Blvd
Toledo, OH 43613

Van Ru Credit Corporation
150 S. Sunnyslope, Ste. 108
Brookfield, WI 53005-6461

Village of Diamond
1750 E. Division St.
Diamond, IL 60416

West Asset Management, Inc.
PO Box 2348
Sherman, TX 75091-2348

Wexler & Wexler
500 W. Madison St.
Ste. 2910
Chicago, IL 60661-4571